

MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

MICHIGAN DEP ORIGINAL OR AMENDED STATEMENT OF ORGANIZATION FORM FOR BALLOT QUESTION COMMIT

1. Committee ID # 14 Co	11 Nome and Add 100 COMMITTEES
1. Committee ID #: 14.00 17 131553	Name and Address of Depositories or Intended Depositories of committee funds.
2. Type of Filing:	a. Official Depository
त्रे Original	Comerica
☐ Amendment to Items: Eff. Date://	28801 Groesbeck
Eff. Date: / /	Roseville, MI 48066
3. Date Committee was Formed: 11 / 09 / 04	b. Secondary Depository
4. Full Name of Committee:	
Excellence in Education Committee	
5. Acronym or Abbreviation (if any):	12. Complete if Committee is being registered to support or oppose a
Complete Committee Mailing Address (May be PO Box):	specific ballot proposal: XXSupport or □Oppose
26017 Ronald	If not a statewide proposal, list the county, city, township, village or school
Roseville, MI 48066	district involved. If multi-county, list the county where the greatest number of voters eligible to vote on the proposal reside:
	□Statewide
7.Complete Committee. Street Address (May not be PO Box):	☐County ☐Multi: County:
SAUS	MLocal School District-City of Roseville
	13. ELECTRONIC FILING: This item applies to committees that file with the Michigan Department of State Bureau of Elections only and does not apply to Ballot Question Committees that file with the County Clerk's office.
Committee Phone #: (586)	The Campaign Finance Act requires any committee that files with the
Committee Fax #: ()	1 Secretary of State and spends or receives \$20 000 in the proportion patents.
Committee E-mail Address:	year OR expects to spend or receive \$20,000 in the current calendar year to file campaign statements electronically. MERTS Plus software is provided to you free of charge to assist you in meeting this requirement.
8. Treasurer Name and Complete Address:	Committee spent or received or expects to spend or receive in excess of
Carmel Hart	\$20,000 and is required to file electronically.
26017 Ronald	** OR **
Roseville, MI 48066	☐ Committee did not spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically voluntarily.
Phone #: (586) 777 - 5205	14. Verification: I/We certify that all reasonable diligence was used in the
E-mail Address:	I proportion of the above statement and that the contents are take account.
	we further agree that the signatures below shall serve as the signatures that
Designated Record Keeper Name and Complete Address:	Verily the accuracy and completeness of each statement filed of commission in the
o and a supplemental and a suppl	the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that
	the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date below)
	Current Treasurer:
	Outent Heastlet.
Phone #: () -	/ man GO A A
	() I was a line of the same o
E-mail Address:	<u>11 / 09 / 04</u>
	Designated Record Keeper (Required only if filing electronically):
0. ☑ REPORTING WAIVER REQUEST: If the committee does not expect or receive or expend in excess of \$1,000 in an election and checks this box;	·
ne filing requirement of pre, post and annual campaign statements is	1
vaived. The Reporting Waiver will be automatically lost if the committee xceeds the \$1,000 threshold.	
R BOSO 08/03: Authority granted under Act 388 of 1976, as amended	